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NJDHSS Communicable Disease Service Weekly Statewide Influenza Activity Summary

Week Ending December 2, 2005

Influenza level of activity: "NO ACTIVITY"

Influenza testing performed in New Jersey by:

- ◆ The Public Health and Environmental Laboratories (PHEL)*
- ◆ The WHO and NREVSS (National Respiratory and Enteric Virus Surveillance System)* Laboratories from September 20, 2005 to present:
 - Number of influenza A culture confirmed cases: None
 - Number of influenza B culture confirmed cases: One

This is the tenth week of the 2005-06 influenza season in New Jersey. The NJDHSS Communicable Disease Service has not been notified of any influenza outbreak or increased activity in any health care facilities, nursing homes or schools throughout the state. Seven weeks ago, one of the two laboratories mentioned above reported the first culture positive influenza case of the season.

Rates of influenza-like illness (ILI) from nursing homes and emergency department visits are 0.77% and 4.36% respectively while the rate for school absenteeism is 4.96%.

Hospital laboratory surveillance for respiratory syncytial virus (often clinically indistinguishable from influenza virus infection), showed an increase in the number of tests performed and the number of positives from last week. We expect a steady increase in both numbers as we progress into the season. Also, the monthly RSV summary report for October showed a similar increase.

A few of the county percentage parameters showed figures well above the total average (see 29Nov05pdf Table) but should not be interpreted as an increased level of activity since the denominator of reporting entities is very small.

From the analysis of all data collected this week from the ILI surveillance system, the level of influenza activity in the state of New Jersey remains at a level of "NO ACTIVITY". This level of activity is comparable with the same period last season.

On November 10, 2005, the CDC held a press conference on the status of influenza vaccine supply and distribution in the US. At least 71 million doses of influenza vaccine have been distributed, and the CDC anticipates that more than 81 million doses will be distributed by the end of November. Depending on the supplies that emerge in December toward the end of the manufacturing cycle, it may also be the largest amount of influenza vaccine ever available for the country. For a full text of the press release go to: http://www.cdc.gov/od/oc/media/transcripts/t051110.htm

The DHSS website listing the local health department and other flu clinics is now operational and is available at http://www.nj.gov/health/flu/. The public can get information on where flu shots are being given from the website.

Influenza virus infection itself is not a clinical or laboratory reportable disease in New Jersey according to N.J.A.C. 8:57-1. Accordingly, activity levels must be extrapolated from weekly monitoring activities of healthcare facilities and providers dispersed around the state.

President Bush, in a speech four weeks ago unveiled a broad national plan on safeguarding America against pandemic influenza. A fact sheet from the White House regarding the President's speech can be found at http://www.pandemicflu.gov./

The Ministry of Health in Indonesia has confirmed an additional case of human infection with the H5N1 Avian influenza virus. The case is a 16-year-old boy from West Java Province. The newly confirmed case brings the total number in Indonesia to 12, of which 7 were fatal. At the invitation of the Chinese Ministry of Health, WHO is participating in a joint mission in Anhui Province, to investigate circumstances surrounding the recent detection of two human cases of H5N1 infection in that province. Both fatal cases occurred in female farmers 24 and 35 years of age. To date, the cumulative number of confirmed human cases of Avian influenza A/(H5N1) reported to WHO stands at 133 including 68 deaths. WHO reports only laboratory-confirmed cases. For more information go to: http://www.who.int/csr/disease/influenza/en/

*The laboratories conduct testing of pre-season isolates and the first isolates of the season. These isolates can provide information regarding circulating strains and information necessary for the vaccine formulation for the following year's flu season. Also test results from representative samples collected during peak influenza activity late in the season, and after a major influenza outbreak, may identify new variants that are just beginning to circulate in the community, helping to inform vaccine formulations for the following year.

References and Resources:

- To obtain previous ILI reports: http://nj.gov/health/fluinfo/index.html
- http://www.nj.gov/health/flu/preventflu.shtml
- http://www.cdc.gov/flu/
- http://www.who.int/csr/disease/influenza/en/
- http://www.cdc.gov/mmwr/